| DO NOT V | VRITE IN THIS BLO |) CK | - FOR EXAMIN | VING OF | FICE ON | VLY | | |
|---|---|-------------|---|---------------------------|------------------------|------------------------|--------------------------|----------------------|
| Case ID# Action S | | JUN | Fee St | | | <u> </u> | | |
| A# | | | | | | | | |
| <u> </u> | | | | | | | | |
| G-28 or Volag # | | | | | | | | |
| Section of Law: ☐ 201 (b) spouse ☐ 203 (a)(1) | | | | was filed | | · F | (priority] Previous! | date) y Forwarded |
| ☐ 201 (b) child ☐ 203 (a)(2) | | | 1 — | | A" File Revi | |] Stateside | • |
| 201 (b) parent 203 (a)(4) 203 (a)(5) | | | ☐ Field | l Investigat | ions | |] 1-485 Sin | nultaneously |
| AM CON: | | | 204 | (a)(2)(A) R | esolved | |] 204 (h) F | Resolved |
| Remarks: | | | | | | | | |
| A. Relationship | | | | ·· ······ | | | | |
| The alien relative is my ☐ Husband/Wife ☐ Parent ☐ Broth | 2. Are ner/Sister 🔲 Child 🔲 🖰 | | elated by adoption? No | 3. Did you Yes | | anentresid No | ence throug | gh adoption? |
| B. Information about you | | | C. Informat | | | r alien r | elative | |
| 1. Name (Family name in CAPS) (Firs SINGH Debra Ann | t) (Middle) | | 1. Name (Family SINGH Suring | | CAPS) (| First) | (Middle) | |
| Address (Number and Street) Inwood Drive | mber and Street) (Apartment Number) 2. Address (Number and Street) (Apartment Num | | | | ent Number) | | | |
| (Town or City) (State/Cour Bardonia, New York 10954 | ntry) (ZIP/Postal Cod | le) | (Town or City Bardonia, New | y) York 109 | (State/Co 954 | untry) | (ZIP/Po | stal Code) |
| 3. Place of Birth (Town or City) New York | (State/Country) USA |) | Place of Birth Punjab | (Town or | City) | | (State/ India | Country) |
| 4. Date of Birth 5. Sex | 6. Marital Status | | 4. Date of Birth | | 5. Sex | 6. Ma | rital Status | |
| | ☑ Married ☐ Single | | (Mo/Day/Yr) | | | _ | rried 🔲 | - |
| | ☐ Widowed ☐ Divorced | <u> </u> | 7-19-65 | 11 . 4 | Female | | lowed 🗌 | Divorced |
| 7. Other Names Used (including maiden na Totani- maiden name, Sevim- prior ma | ime) irriage | | 7. Other Names None | Usea (Incil | uaing maiae | en name) | | |
| 8. Date and Place of Present Marriage (if m 8-20-97 New City, New York | narried) | | 8. Date and Place 8-20-97 New (| ce of Presentity, New | nt Marriage York | (if married | l) | |
| 9. Social Security Number 10. Alien N/A | Registration Number (if a | ny) | 9. Social Securit 082-82-1749 | y Number | 10. <i>4</i> 73 17 | Alien Regist 77 909 | tration Num | ber (if any) |
| 11. Names of Prior Husbands/Wives 12. E Ramazan Sevim 10-94 | | | 11. Names of Pric | or Husband | s/Wives 1 | 2. Date(s) | Marriages | (s) Ended |
| - V - U.G. Sister accordance to | f_H | | 13. Has your relat | tive ever be | an in the L | 162 | | |
| If you are a U.S. citizen, complete the f My citizenship was acquired through (ch | • | | ✓ Yes | □ No | | ,. . ., | | |
| ☑ Birth in the U.S. | 100K 0110, | | 14. If your relative | | ly in the U. | S., comple | te the follo | wing: He or |
| Naturalization (Give number of certification) | ate, date and place it was iss | ued) | she last arrive | | or, student, | stowaway, ' | without insp | ection, etc.) |
| | | | Without Inspect | | 41.11 | | | |
| Parents | | | Arrival/Departure F | Record (1-94 | Number (1- | 9-92 | ived (Mont) | h/Day/Year) |
| Have you obtained a certificate of cit ☐ Yes ☐ No | izenship in your own nam | 10? | Date authorized sta | y expired, c | r will expir | e, as showi | n on Form | I-94 or I-95 |
| If "Yes", give number of certificate, date | and place it was issued | | | | ·· | | | |
| | | | 15. Name and add Park Machin | dress of pro ne & Tool | esent emplo Company | oyer (if any ' |) | |
| 4a. If you are a lawful permanent resident a | ilien, complete the follow | ing: | Kindermack | Road, Pa | rk Ridge, | New Jers | ey | |
| Date and place of admission for, or adjustmental and class of admission: | nt to, lawful permanent resid | lence, | Date this emp 2-97 | loyment be | gan (Monti | n/Day/Year |) | |
| and diase of edimentin. | | | 16. Has you relati | ve ever bee | en under im | migration p | proceeding | s? |
| 4b. Did you gain permanent resident status | through marriage to a Un | ited | ☑ Yes | _ | - | | | |
| States citizen or lawful permanent reside | ent? Yes No | | Exclusion | ☑ Depor | tation 🔲 R | ecission [| Judicial | Proceedings |
| | INITIAL RECEIPT | | RESUBMITTED | RELO | CATED | | COMPLETE | D |
| | | | | Rec'd | Sent | Approved | Denied | Returned |
| orm I-130 (Rev. 4/11/91) Y | | | <u> </u> | L | <u> </u> | <u> </u> | L | |

| C. (continued) Information aby 61 Your alien rela | meet 1-2 File | | age 2 of 3 |
|--|---|--------------------------------|------------------------------|
| 6. List husband/wife and all children of your mative (if your relative is) | your husband/wire, iis Date of Birt) | t one indicant | (Country of Birth) |
| (Name) (Relationship) | (Date of Dire | | |
| None | | | |
| | | | |
| | | | |
| | · | | |
| 7. Address in the United States where your relative intends to live | (Town or City) | | (State) |
| (Number and Street) 9 Inwood Drivさ | Bardonia | | New York |
| 8. Your relative's address abroad | | | |
| (Number and Street) (Town or City) | (Province) | (Country) India | (Phone Number) |
| Village Jai Singh Wala P.O.Badwala Punjab | | | a alphahat: |
| 9. If your relative's native alphabet is other than Roman letters, write h | is or her name and ad (Town or City) | (Province) | (Country) |
| (Name) (Number and Street) | | | |
| O. If filing for your husband/wife, give last address at which you both li | ved together: | From | То |
| (Name) (Number and Street) (Town or City) (Province) | (Country) USA | (Month) (Year) 11-95 | (Month) (Year) Present |
| Surinder Single 7 minore 2 minore | | | |
| 1. Check the appropriate box below and give the information required t Your relative will apply for a visa abroad at the American Consulate in | | eu. | |
| Your relative will apply for a visa abroad at the American Constitute in _ | (City) | (Country) | |
| Your relative is in the United States and will apply for adjustment of state | us to that of a lawful pe | rmanent resident in the offic | e of the Immigration and |
| Naturalization Service at New York New York (City) (State) | K | e is not eligible for adjustme | nt of status, he or she will |
| 10.17 | <u>I</u> | ndia | , |
| apply for a visa abroad at the American Consulate in (City) | (C | ountry) | |
| (Designation of a consulate outside the country of your relative's last residen | nce does not guarantee a | oceptance for processing by | that consulate. |
| Acceptance is at the discretion of the designated consulate.) | | | |
| O. Other Information | | | |
| 1. If separate petitions are also being submitted for other relatives, give | names of each and re | lationship. | |
| | | □ No | |
| 2. Have you ever filed a petition for this or any other alien before? If "Yes," give name, place and date of filing, and result. | ✓ Yes | □ 1/10 | |
| Ramazan Sevim- 1986- Granted | | | |
| | erifies the validity | of documents. The | INS seeks |
| Varning: The INS investigates claimed relationships and veriminal prosecutions when family relationships are falsifie | d to obtain visas. | of doodinontor the | |
| anning processing the same | | | |
| 'enalties: You may, by law be imprisoned for not more th | an five years, or t | fined \$250,000, or t | ooth, for entering into a |
| | | | |
| narriage contract for the purpose of evading any provision, 10,000 or imprisoned up to five years or both, for knowning any false document in submitting this petition. | wingiy and wilitui | ly faisifying of conc | ealing a material fact of |
| ising any raise document in submitting this potition. | | | |
| our Certification; I certify, under penalty of perjury under | the laws of the U | Jnited States of Ame | erica, that the foregoing |
| The second services burchermore I guithorize the release | OT MIN HINDINIAU | Dil Holli IIIy ICCOIGG | which the Immigration |
| nd Naturalizaton Service needs to determine eligibility for | fue beneur mar i | an seeking. | |
| Signature Debra Com Singh | Data 9/ | 4/97 Phone Nur | nber (914) 624-2702 |
| | Date | -7 | |
| ignature of Person Preparing Form if Other than Above | | information of which I have s | ny knowledae. |
| I declare that I prepared this document at the request of the person above an | | MINIMATOR OF WINDER I HAVE & | . , / |
| 22 South Main Street Name Thomas Sassone (Address) New City, NY 109 | eet 056(Signature) | The som | Date) 9/4/9/ |
| Print Name Thomas Sassone (Address) New City, NY 109 | (Signature) | <u> </u> | J 4.0/ |
| | | G-28 ID Number | |
| | | | |
| | | Volag Number | |

Case 7:07-cv-06178-SCR Document 1-2 Filed 07/02/2007 Page 3 of 3 NOTICE TO PERSONS FILING FOR SPOUSES IF MARRIED ESS THAN TWO YEARS

Pursuant to section 216 of the Immigration and Nationality Act, your alien spouse may be granted conditional permanent resident status in the United States as of the date he or she is admitted or adjusted to conditional status by an officer of the Immigration and Naturalization Service. Both you and your conditional permanent resident spouse are required to file a petition, Form I-751, Joint Petition to Remove Conditional Basis of Alien's Permanent Resident Status, during the ninety day period immediately before the second anniversary of the date your alien spouse was granted conditional permanent residence.

Otherwise, the rights, privileges, responsibilities and duties which apply to all other permanent residents apply equally to a conditional permanent resident. A conditional permanent resident is not limited to the right to apply for naturalization, to file petitions in behalf of qualifying relatives, or to reside permanently in the United States as an immigrant in accordance with the immigration laws.

Failure to file Form I-751, Joint Petition to Remove the Conditional Basis of Alien's Permanent Resident Status, will result in termination of permanent residence status and initiation of deportation proceedings.

NOTE: You must complete Items 1 through 6 to assure that petition approval is recorded. Do not write in the section below item 6.

| 1. Name of relative (Family name in CAPS) SINGH | (First) Surinder | (Middle) | |
|---|---|--|--|
| 2. Other names used by relative (Including None | maiden name) | | |
| 3. Country of relative's birth India | 4. Date of relative 07/19/65 | re's birth (Month/Day/Year) | |
| Your name (Last name in CAPS) (First)SINGH Debra Ann | (Middle) 6. (9) | Your phone number 14) 624-2702 | |
| Action Stamp S | DECTION 201 (b)(spouse) 201 (b)(child) 201 (b)(parent) 203 (a)(1) 203 (a)(2) | DATE PETITION FILED STATESIDE CRITERIA GRANTED | |
| | 203 (a)(4) 203 (a)(5) | SENT TO CONSUL AT; | |

CHECKLIST

Have you answered each question?
Have you signed the petition?
Have you enclosed:

- The filing fee for each petition?
- Proof of your citizenship or lawful permanent residence?
- All required supporting documents for each petition?

If you are filing for your husband or wife have you included:

- ☑ Your picture?
- ☑ His or her picture?
- ✓ Your G-325A?